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REQUEST	FOR C	ONTINUE)
EXAMINATION ((RCE	TRANSM	TFA

Address to:

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Application Number	09/855,073
Filing Date	May 14, 2001
First Named Inventor	David Tucker
Group Art Unit	2134
Examiner Name	Matthew Heneghan
Attorney Docket Number	20423-10523

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-entitled application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

	filed	prior to June 8, 1995, or to any design application.						
1.	SUBN	ISSION REQUIRED UNDER 37 C.F.R. § 1.114						
•	a. 🔲	Previously submitted	_					
	i.	Consider the amendment(s)/reply under 37 C.F.R. (Any unentered amendment(s) referred to above will be entered).	§ 1.1	16 previously filed on				
	ii.	☐ Consider the arguments in the Appeal Brief or Repl	y Brie	ef previously filed on _				
	iii.	Other						
	b. 🔯	Enclosed						
	i.							
	ii.	☐ Affidavit(s)/Declaration(s)						
	iii.	☐ Information Disclosure Statement (IDS)	; 1	03/07/2006 CCHAU1	00000001	92555	09855073	
	iv.	Other	i					
2.	Miscell	aneous	ł	01 FC:1801		/90).00 OP	
•	а. 🔲	Suspension of action on the above-identified application		•	-	B(c) for a	a period of	
	. 57	months. (Period of suspension shall not exceed 3 mor	iths; F	ee under 37 C.F.R. § 1.17(i)	required)			
	b. 🛛	Return Postcard						
	c. 🗌	Other						
3.	Fees	The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.1	14 wh	en the RCE is filed.				
	a. 🛛	The Director is hereby authorized to charge any additio	nal fe	es, or credit any over	payments,			
		to Deposit Account No19-2555				•		
	\boxtimes	Fee Transmittal Enclosed (in duplicate)						
	\boxtimes	Check in the amount of \$900.00 enclosed						
		SIGNATURE OF APPLICANT, ATT	OPA	EV OR AGENT REC	IIIDED		1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 1 1 1 2 1	
Nan	ne (Pri	nt/Type) Antonia L. Sequeira , [/		istration No. (Attorney		54,670	-10	
	nature	$\mathcal{O}_{\mathcal{I}}$	Date	- T T				
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		CERTIFICATE OF MAILI						
Sto or if	p RCE, C the Expr	fy that this correspondence is being deposited with the United S ommissioner For Patents, P.O. Box 1450, Alexandria, VA 2231 ess Mail Mailing Number is filled in below, then this corresponde	3-145	0, or facsimile transmitte	d to the U.S.	Patent a	and Trademarl	k Office,
		ice to Addressee" service on:	Da	viotration No. /Attorna	v/Agent)	54.670	<u> </u>	
	me (Pri Inature	nt/Type) Antonia L. Sequeira /	Dat	gistration No. (Attorne e 3/2./o		34,070		
		Monacegn		3/2/0	<u> </u>			

FEE TRANSMITTA for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CARA 27 (\$) 900

TOTAL AMOUNT OF PAYMENT

Complete if Known 09/855,073 Application Number May 14, 2001 Filing Date **David Tucker** First Named Inventor Examiner Name Matthew Heneghan Art Unit 2134 Attorney Docket No. 20423-10523

METHOD OF PAYMENT (check all that apply)				F	FEE CALCULATION (continued)			
□ Check □ Credit Card □ Money Order □ Other □ None □ Deposit Account:		3. ADDITIONAL FEES						
Deposit Account Number 19-2555		Large Entity Small Entity		Entity	Fee Description	Fee Paid		
Deposit Account Name Fenwick & West LLP		Fee (\$)	Fee Code	Fee (\$)				
The Commissioner is authorized to: (check all that apply)		130	2051	65	Surcharge - late filing fee or oath or declaration			
Charge fee(s) indicated below Credit any overpayments	1052 1053	50	2052	25	Surcharge - late provisional filing fee or cover sheet			
Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this		130	1053	130	Non-English specification			
application		2,520	1812	2,520	For filing a request for ex parte reexamination			
Charge fee(s) indicated below, except for the filing fee to	1804	920*	1804 1805	920* 1,840*	Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Examiner action			
the above-identified deposit account. FEE CALCULATION	1805 1251	1,840* 1 1 0	2251	55	Extension for reply within first month	110		
1. BASIC FILING FEE	1251	430	2252	215	Extension for reply within second month	110		
Large Entity Small Entity	1252	980	2253	490	Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,530	2254	765	Extension for reply within fourth month			
Code (\$) Code (\$)	1255	2,080	2255	1,040	Extension for reply within fifth month			
1001 790 2001 395 Utility filing fee	1401	340	2401	170	Notice of Appeal			
1002 350 2002 175 Design filing fee	1402	340	2402	170	Filing a brief in support of an appeal	<u> </u>		
1003 550 2003 275 Plant filing fee	1403	300	2403	150 1,510	Request for oral hearing			
1004 790 2004 395 Reissue filing fee	1451 1452	1,510	1451 2452	55	Petition to institute a public use proceeding			
1005 160 2005 80 Provisional filing fee (\$\)		110			Petition to revive - unavoidable			
SUBTOTAL (1) (\$) 0		1,370	2453	685	Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,370	2501	685	Utility issue fee (or reissue)			
Extra Claims Fee from Fee Paid below		490	2502	245	Design issue fee			
Total Claims -20**= X =	1503	660	2503	330	Plant issue fee			
Independent Claims X = X	1460	130	1460	130	Petitions to the Director			
Multiple Dependent =		50	1807	50	Processing fee for Provisional Applications			
Large Entity Small Entity		180	1806	180	Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Fee Description Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))			
1201 88 2201 44 Independent claims in excess of 3	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))			
1203 300 2203 150 Multiple dependent claim, if not paid	1801	790	2801	395	Request for Continued Examination (RCE)	790		
1204 88 2204 44 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application			
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	Other fee (specify)							
					(0) 222			
SUBTOTAL (2) (\$) "or number previously paid, if greater; For Reissues, see above	⁺Reduc	ed by Basi	c Filing F	ee Paid	SUBTOTAL (3) (\$) 900			
SUBMITTED BY Complete (if applicable)								
Name (Print/Type) Antonia L. Sequeira		ration Noney/Ager		1,670 Telephone (650) 335-71	85			
Signature Mowa / Re			<u>. </u>		Date 3/2/06			